

Submit 3 Copies To Appropriate District Office  
District I  
1625 N. French Dr., Hobbs, NM 87240  
District II  
1301 W. Grand Ave., Artesia, NM 88210  
District III  
1000 Rio Brazos Rd., Aztec, NM 87410  
District IV  
1220 S. St. Francis Dr., Santa Fe, NM 87505

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MAR 19 2009

HOBBS

State of New Mexico  
Minerals and Natural Resources  
OIL CONSERVATION DIVISION  
1220 South St. Francis Dr.  
Santa Fe, NM 87505

Form C-103  
May 27, 2004

WELL API NO. 30-025-05445
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name: North Hobbs G/SA Unit
8. Well Number 431
9. OGRID Number 157984
10. Pool name or Wildcat Hobbs; Grayburg - San Andres

**SUNDRY NOTICES AND REPORTS ON WELLS**  
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)

1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other WIW	11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3676' DF
2. Name of Operator Occidental Permian Limited Partnership	
3. Address of Operator P.O. Box 4294, Houston, TX 77210-4294	
4. Well Location Unit Letter I : 1650 feet from the South line and 990 feet from the East line Section 13 Township 18-S Range 37-E NMPM County Lea	

Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/>
Pit type _____ Depth to Groundwater _____ Distance from nearest fresh water well _____ Distance from nearest surface water _____
Pit Liner Thickness: _____ mil Below-Grade Tank: Volume _____ bbls; Construction Material _____

12. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data	
<b>NOTICE OF INTENTION TO:</b> PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPLETION <input type="checkbox"/> OTHER: <input type="checkbox"/>	<b>SUBSEQUENT REPORT OF:</b> REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> PLUG AND ABANDONMENT <input type="checkbox"/> CASING TEST AND CEMENT JOB <input type="checkbox"/> OTHER: Commence Injection After Workover <input checked="" type="checkbox"/>

13. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work). SEE RULE 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

Subject well commenced injection on 3/13/09 - the well had been shut-in since the RTI procedure (11/24/08 - 12/5/08); see attached copy of previously approved C-103 (2/12/09).

I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines ☒ , a general permit ☐ or an (attached) alternative OCD-approved plan ☐

SIGNATURE Mark Stephens TITLE Regulatory Compliance Analyst DATE 3/17/09  
E-mail address: Mark\_Stephens@oxy.com Telephone No. (713) 366-5158

Type or print name Mark Stephens

For State Use Only  
APPROVED BY Cathy W. Hill DISTRICT 1 SUPERVISOR DATE MAR 20 2009  
Conditions of Approval, if any:

# COPY

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FEB 11 2009  
HOBBSCOCD

State of New Mexico  
Energy, Minerals and Natural Resources  
OIL CONSERVATION DIVISION  
1220 South St. Francis Dr.  
Santa Fe, NM 87505

Form C-103  
May 27, 2004

SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)	
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other WIW (currently SI) <input checked="" type="checkbox"/>	WELL API NO. 30-025-05445
2. Name of Operator Occidental Permian Limited Partnership	5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
3. Address of Operator P.O. Box 4294, Houston, TX 77210-4294	6. State Oil & Gas Lease No.
4. Well Location Unit Letter <u>I</u> : <u>1650</u> feet from the <u>South</u> line and <u>990</u> feet from the <u>East</u> line Section <u>13</u> Township <u>18-S</u> Range <u>37-E</u> NMPM County <u>Lea</u>	7. Lease Name or Unit Agreement Name: North Hobbs G/SA Unit
	8. Well Number 431
	9. OGRID Number 157984
	10. Pool name or Wildcat Hobbs; Grayburg - San Andres
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3676' DF	
Fit or Below-grade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/> Fit type _____ Depth to Groundwater _____ Distance from nearest fresh water well _____ Distance from nearest surface water _____ Pit Liner Thickness: _____ mil Below-Grade Tank: Volume _____ bbls; Construction Material _____	

12. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data	
<b>NOTICE OF INTENTION TO:</b> PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPLETION <input type="checkbox"/> OTHER: <input type="checkbox"/>	<b>SUBSEQUENT REPORT OF:</b> REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> PLUG AND ABANDONMENT <input type="checkbox"/> CASING TEST AND CEMENT JOB <input type="checkbox"/> OTHER: Return to Injection <input checked="" type="checkbox"/>

13. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work). SEE RULE 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

See Attachment

I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines ☒ , a general permit ☐ or an (attached) alternative OCD-approved plan ☐

SIGNATURE Mark Stephens TITLE Regulatory Compliance Analyst DATE 2/6/09  
Type or print name Mark Stephens E-mail address: Mark\_Stephens@oxy.com Telephone No. (713) 366-5158

For State Use Only  
APPROVED BY [Signature] TITLE DISTRICT 1 SUPERVISOR DATE FEB 12 2009  
Conditions of Approval, if any:

11/24/08 - 12/5/08

MI x RU. ND WH x NU BOP. RIH with 3-7/8" bit x tag at 4030'. Drill out cement from 4030' - 4070'. Drill on CIBP at 4070' x push to 4265'. Drill on CIBP and bad casing at 4268'. Run CN/CCL/GR log from 4268' to 3000'. RU WL x dump bail 17 ft. of cement. Tag at 4251'. RIH with 4-1/2" straddle packer x set at 4135'. Acidize perfs at 4163' - 4246' with 1088 gal. 15% NEFE HCL. RU WL x dump bail 1 ft. of cement x tag at 4250' (PBTB). RIH with 4-1/2" isolation packer (set at 4124') and 4-1/2" Arrowset 1-X retrievable packer (set at 4061') on 122 jts. 2-7/8" duoline injection tubing. ND BOP x NU WH. Pressure test casing to 520 psi x 30 min. (held). Test was witnessed by the NMOCD (John Harrison). RD x MO x clean location.

NOTE: Injection has not yet commenced - the well is pending additional surface work and tie-in to automation. A C-103 will be filed to advise the date the well is put on injection.